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DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION

(37 CFR 1.63)

OR

Declaration

required)

Submitted after Initial Filing (surcharge

(37 CFR 1.16 (e))

☑ Declaration

Submitted

with Initial

Filing

PTO/SB/01 (12-97)

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Att rney D cket Number First Named Inventor Daniel, Thomas O. COMPLETE IF KNOWN Application Number Filing Date Group Art Unit Examiner Name

As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: MODULATION OF ENDOTHELIAL CELL SURFACE RECEPTOR ACTIVITY IN THE REGULATION OF ANGIOGENESIS the specification of which (Title of the Invention) Xis attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. Certified Copy Attached? **Priority** Prior Foreign Application Foreign Filing Date Number(s) Country (MM/DD/YYYY) Not Claimed Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. Application Number(s) Filing Date (MM/DD/YYYY) Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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Ihereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.														
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Jeffrey L.				6,058			1		. Gloe			41,03		
Jennifer L				0,687					/ A. H			41,08		
Additional	registered	d practitioner(s) name	ed on si	upplementa	ıl Registere	d Pract	itioner Ir	nforma	ation sher	et PTO/	SB/02C	attached here	∍to.	
Direct all correspondence to: Customer Number or Bar Code Label OR X Correspondence address below									ress below					
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Address	Suite	1400 University Tower												
Address	3100	Tower Boulevard												
City	Durha	am				s	tate	NC		ZIP	2770	07		
Country	USA	Telephone 001-919-493-8000						0 _ [Fax 001-919-419-0383					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.														
Name of Sole or First Inventor:								entor						
Given Name (first and middle [if any])						Family Name or Sumame								
Thomas O. Daniel														
Inventor's Signature											Date			
Residence: City Nashville			State TN		Τ,	Country US						US		
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Post Office A	Post Office Address 3905B Trimble ROad													
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor											
Given Nar	Family Name or Surname										
Takamune				Takal	hashi						
Inventor's Signature		Date									
Residence: City	Nashville	State	TN		Country	US		Citizens	hip J	apan	
Post Office Address	2025 Woodmont Boulevard										
Post Office Address	Apt. 335	· · · · ·		1				1			
City	Nashville	State	TN		ZIP 3	7215	Country	USA			
Name of Addition	nal Joint Inventor, if an	ıy:			A petitio	n has been filed	for th	is unsigr	ned inv	entor	
Given Nar	me (first and middle [if any])				Family Nam	ne or	Sumame			
Raymond Mernaugh											
Inventor's Signature	Date										
Residence: City	Nashville	State	TN		Country	US		Citizer	nship	us	
Post Office Address											
Post Office Address											
City		State			ZIP		Cour	ntry			
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any]) Family Name or Surname											
Inventor's Signature								Dar	te		
Residence: City		State Country Citizenship									
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